

CLAIMS ONLY  
BEST AVAILABLE COPY

Application Number

Filing Date

10/663, 464

9-16-03

**Applicant(s)**

\* May be used for additional claims or amendments

CLAIMS	AS FILED 5/23-01		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2	1	1				
3	1	1				
4	1	1				
5	1	1				
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Total Indep	2					
Total Depend	10					
Total Claims	12					

	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep						
Total Depend						
Total Claims						